### FORM D



SEC 1972 (6-02)

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

### FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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OMB APPRO	VAL
OMB Number:	3235-0076
Expires:	
Estimated average	burden
hours per respons	e 16.00

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DATE F	RECEIVED
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Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	PECFIVED (
Class B Common Stock Filing Under (Check box(es) that apply):	ULOE / COT 1 T and
Type of Filing: New Filing  Amendment	V 001 11 1 200
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	105/S
Name of Issuer (  check if this is an amendment and name has changed, and indicate change.)	<del></del>
American Power Tool Company	$\checkmark$
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
6525 Gunpark Drive #169, Boulder, CO 80301	(970) 482-1906
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	<u> </u>
·	
Type of Business Organization	PROCESOE
corporation   limited partnership, already formed   other (p	please specify):  OCT 3 0 2006  THOMSO
Month Year	UCT 3 (1.200c)
Actual or Estimated Date of Incorporation or Organization: 04 03 Actual Estim	mated \\ THOME
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State  CN for Canada; FN for other foreign jurisdiction)	EIG FINANCIAL
GENERAL INSTRUCTIONS	VCIAL
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D 6 77d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given b which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	9549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	ly signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only repo thereto, the information requested in Part C, and any material changes from the information previously supplied with the SEC.	
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for s ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the S are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	Securities Administrator in each state where sales in the exemption, a fee in the proper amount shall
ATTENTION —	
Failure to file notice in the appropriate states will not result in a loss of the federal exappropriate federal notice will not result in a loss of an available state exemption unle filling of a federal notice.	

Persons who respond to the collection of information contained in this form are not

required to respond unless the form displays a currently valid OMB control number.

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1 of 9

#### A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Promoter Beneficial Owner Z Executive Officer ✓ Director General and/or Check Box(cs) that Apply: Managing Partner Full Name (Last name first, if individual) David Wilson, Jr. Business or Residence Address (Number and Street, City, State, Zip Code) 6525 Gunpark Drive #169, Boulder, CO 80301 ☐ Beneficial Owner Executive Officer General and/or Check Box(es) that Apply: Promoter Director **Managing Portner** Full Name (Last name first, if individual) Caroline Wilson Business or Residence Address (Number and Street, City, State, Zip Code) 6525 Gunpark Drive #169, Boulder, CO 80301 Promoter Executive Officer **Beneficial Owner** Check Box(es) that Apply: ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter **Beneficial Owner** Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter **Beneficial Owner** Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					B. IN	FORMATI	ON ABOU	T OFFERI	ŊĜŢŢŢ	拟对抗			
: 21	M.S. T	7. EU 42- 17					124 1 2		atila astrait			Yes	No 🖂
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?						X							
Answer also in Appendix, Column 2, if filing under ULOE.  2. What is the minimum investment that will be accepted from any individual?								s 5,0	00.00				
2.	What is t	the minim	um investm	ent that w	iii be acce	olca mom s	iny maivia	ua):	•••••		•••••••••••••••••••••••••••••••••••••••	Yes	No
			oermit joint									X	
4. l	Enter the	informat	ion request lar remuner	ed for <b>eacl</b>	h person w olicitation	ho has bee of purchase	n or will b ers in conne	e paid or g ection with	given, dire sales of sec	ctly or indi curities in the	irectly, any he offering,		
1	fa nerso	n to be list	ed is an ass	ociated pe	rson or age	nt of a brok	er or deale	r registered	l with the S	EC and/or	with a state		
	or states, a broker	list the na or dealer.	me of the bi	roker or de et forth the	aler. II me informati	on for that	broker or o	is to be list lealer only	cu are asso '.	ciated pers	ons of such	•	
			first, if indi		-	<u>-</u>							
								<u>.</u>					
Busin	ness or R	Residence	Address (N	umber and	l Street, Ci	ty, State, Z	(ip Code)						
Name	c of Asse	ociated Br	oker or Dea	ıler	<u> </u>								. , . ,
State	s in Whi	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers				<del> </del>		
(	(Check "	'All States	" or check	individual	States)					•••••		□ Al	l States
r	AL	[AK]	ΑZ	AR	CA	CO	CT	DE	(DC)	FL.	GA	HI	מו
		N N	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
į	MT	NE	NV	NH)	NI	NM	NY	NC	ND	ОH	OK]	OR	PA
[	RÏ	SC	SD	TN	TX	UT	· VT	VA	WA	<u>WY</u>	WI	WY.	[PR]
Full 1	Name (L	ast name	first, if indi	vidual)							····•	·	
Busin	ness or	Residence	Address (N	iumber an	d Street, C	ity, State, 2	Zip Code)			<del> </del>			
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Namo	c of Ass	ociated Br	oker or Dea	alcr									
State	s in Whi	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(	(Check "	All States	" or check	individual	States)				·····	•••••••	····•		l States
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	MT)	NE	NV	NH	NI	NM	NY	NC	ND	HO	OK	OR	PA
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Full	Name (L	ast name	first, if indi	vidual)	<del></del>								
Busir	ness or	Residence	Address (N	Number an	d Street, C	ity, State, 2	Zip Code)					···.	<del></del>
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Name	e of Asso	ociated Br	oker or Dea	aler ·									
State	s in Whi	ch Person	Listed Has	Solicited	or Intends	to Solicit l	Purchasers						
(Check "All States" or check individual States)								□ AI	l States				
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Ī	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## C OFFERING PRICE NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

••	enter the aggregate offering price of securities included in this offering and the total amount and ady sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and					
	Type of Security		Aggregate		,	Amount Already Sold
		_	_			
	Debt	\$_	1 000 000	-00	\$_	
	Equity	\$_	1,000,000	.00	S	120,000.00
	Common Preferred					
	Convertible Securities (including warrants)	\$_			S	
	Partnership Interests					
	Other (Specify)	\$_			\$	
	,Total	<b>S</b> _	1,000,000	0.00	\$	120,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.					
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	:				
	Accredited Investors		Number Investors			Aggregate Dollar Amount of Purchases 110,000.00
						10,000.00
	Non-accredited Investors					120,000.00
	Total (for filings under Rule 504 only)		·		-	120,000.00
	Answer also in Appendix, Column 4, if filing under ULOE.					
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.	:				
	Type of Offering		Type of Security			Dollar Amount Sold
	Rule 505	_	···		:	S
	Regulation A		<del></del>	_	:	<u></u>
	Rule 504					\$
	Total				5	0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees		······································		\$	
	Printing and Engraving Costs				S	
	Legai Fees				S	4,500.00
	Accounting Fees			<b>Z</b>	S	500.00
	Engineering Fees		*********		\$	
	Sales Commissions (specify finders' fees separately)				\$	7-7-1
	Other Expenses (identify)				\$	<del></del>
	Total				S	5,000.00

33.44 37.75 38.75	L.C.OFI	FERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS	TOTAL CONTRACTOR OF SECTION
	and total expenses furnished in	een the aggregate offering price given in response to Part C — Question 1 or response to Part C — Question 4.a. This difference is the "adjusted gross"	995,000.00
5.	each of the purposes shown, check the box to the left of the	the adjusted gross proceed to the issuer used or proposed to be used for  If the amount for any purpose is not known, furnish an estimate and e estimate. The total of the payments listed must equal the adjusted gross their response to Part C — Question 4.6 above.	
		Payments to Officers. Directors, &	Payments to
	0.1.1.1.0	Affiliates	Others
			□ \$
	•	nd installation of machinery	
	and equipment	S 100,000.00	
	Construction or leasing of p	lant buildings and facilities	<b></b> \$
	offering that may be used in	sees (including the value of securities involved in this exchange for the assets or securities of another	·
	÷ -		□\$
			□\$ □\$
	Other (specify).	<u>'</u>	
		<b>s</b>	
	Column Totals	\$ 695,000.00	S 300,000.00
	Total Payments Listed (colu	mn totals added)	,000.000
la .		D. FEDERAL SIGNATURE	sal d
ign he	ature constitutes an undertak information furnished by the	ice to be signed by the undersigned duly authorized person. If this notice is filed under Ruleing by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.	505, the following request of its staff,
	er (Print or Type)	Signature	
	erican Power Tool Company	The state of the s	
	ne of Signer (Print or Type)	Title of Signer (Print or Type)	
avi	d Wilson, Jr.	President	
	:		
		•	
	· I	ATTENTION ————	<del></del> -
	Intentional misstater	nents or omissions of fact constitute federal criminal violations. (See 18 U.S.C.	. 1001.)